



SCHOLARSHIP QUESTIONNAIRE

SCHOLARSHIP NAME: What would you like to name the scholarship?
_____ Scholarship

Is this scholarship going to be endowed or annual? Endowed scholarships can be used to grant scholarships into perpetuity. Endowed or Annual? _____

AMOUNT AWARDED: Variable as funds allow (up to \$_____) Please indicate any cap on the award(s) you would like to give to candidates.

Note: variable awards allow the committee discretion in award amount to best meet student needs.

DATE ESTABLISHED: _____

CRITERIA: Donors determine the criteria that committee members use to consider awarding funds to students that have applied for a scholarship who meet these pre-determined characteristics.

1. Most Scholarships include language regarding financial need. Student must demonstrate a financial need for supplemental funding. Would you like to use this criteria? Yes___ No___
(The common terminology that allows committee members to consider the most students who match other criteria is above)
2. Student must have a minimum grade point average of (please list any required GPA here. _____
Note: a common GPA to allow you to match your scholarship to the most students is 2.0.
3. Student must be a United States citizen or resident alien. Is this criteria desired for your award? Yes___ No___
4. Student may be enrolled on a ___full-time or ___part-time basis.

5. Student must be enrolled in _____ Field of Study.
5. Scholarship will cover (please select all that apply): _____tuition, _____fees,
_____books, _____materials required by the syllabus.
6. Please list any special instructions/notes/preferences here: _____

Signature of Donor or Donor Designee: _____
Printed Name of Donor or Donor Designee: _____
Date: _____

Signature of Witness: _____
Printed Name of Witness: _____
Date: _____

Amended Date: _____
Signature of Donor or Donor Designee: _____
Printed Name of Donor or Donor Designee: _____
Synopsis of Changes Made to Criterial: _____

Office Use Only:
Changes entered into scholarship database by (print name): _____
Date of Entry: _____
Scanned copy of signed document scanned and entered into donor database by (print name): _____
Date of Upload: _____